PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number			
Effective December 8, 2004									10559749			
		CLAIMS	AS FILED -		(Column 2)			SMALL EN	ГІТҮ	OR	OTHER SMALL E	
U.S. NATIONAL STAGE FEES			(Coldin	(Column 1)		(Column 2)		RATE	FEE	1	RATE	FEE
BASIC FEE			SMALL ENT.	Г. = \$ 150 L		GE ENT. = \$ 300	1	BASIC FEE	100			77/37
EXAMINATION FEE			Satisfies PCT A	rticle 33(1)-	Ali o	ther situations =			<u> </u>	OR	BASIC FEE	3/4
			(4) = \$50 U.S. is ISA = \$	50/\$ 100		\$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	XX
SEARCH FEE			ALL other countries = \$ 200 / \$ 400		ALL other situations = \$ 250 / \$ 500			SEARCH FEE			SEARCH FEE	42
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			16 mir	nus 20 =	*			X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			/ minus 3 =		*		1	X \$ 100 =		OR	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRE			ESENT					+ \$ 180 =	-	OR	+ \$ 360 =	
* If	the difference	in column 1 is	less than zero	, enter "C)" in co	olumn 2		TOTAL		OR	TOTAL	97
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						ı r	SMALL ENTITY		OR	OTHER SMALL E		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FFF		ÖR	TOTAL ADDIT.	
				(Calum	2\	(Caluma 2)		_				–
		(Column 1) CLAIMS		(Colun		(Column 3)	Г		ADDI-	ſ		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF M	ULTIPLE DEPE	NDENT C	CLAIM			+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FFF		OR	TOTAL ADDIT.	
	If the enter in a -1:	ımn 1 in loce there the				_						
**	If the "Highest Nu	ımn 1 is less than the imber Previously Pai	d For" IN THIS SP	ACE is less	than '20	0'. enter "20"]
H W	If the "Highest Nu The "Highest Nur	mber Previousty Pai nber Previousty Paid	d For" IN THIS SP For" (Total or Inde	PACE is less ependent) is	than '3' the higi	, enter "3". hest number found	in the	appropriate box	in column 1.			
												1

FORM 9TO-875 (Rev. 02/2005)

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